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EEE,	TRANKEMITTAL	Complete if Known							
FEE TRANSMITTAL		Application Number	10/666,4						
. 1	or FY 2005	Filing Date		er 19, 2003					
Paten	nt fees are subject to annual revision.	First Named Inventor							
Applicant claim	s small entity status. See 37 CFR 1.27.	Examiner Name	Hyeon, F	Iae M.					
TOTAL AMOUNT	TOF DAYMENT (C)	Art Unit	2839						
TOTAL AMOUN	T OF PAYMENT (\$) 0.00	Attorney Docket No.	42P16890)					
METHOD OF PAYMENT (check all that apply)									
□Check □Cred	lit card Money Order None	Other (please identif	ÿ):						
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.									
FEE CALCULATIO	ON								
Fee Fee Code (\$) Cod 1202 50 220 1201 200 220 1203 360 220 1205 220 1205 220 1205 220 1205 220 1205 2053 1251 1252 1253 1254 1255 1401 1402 1403 1451 1460 1807 1806 1809	Calms below Fee Paid Calms below Fee Paid Solution State S	et.	rmber previously paid, if s	e Paid	ies, see below				
	SUBTOTAL (2)		(\$)						
SUBMITTED BY	////			Comp	lete (if applicable)				
Name (Print/Type)	Mark L. Watson	Registration No. (Attorney/Agent)	46,322	Telephone	(303) 740-1980				
Signature	///		ļ	Date	09/07/05				

Our Docket No: 42P16890

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	Application of:)		
	Stone et al.)	Examiner:	Hyeon, Hae M.
Applio	cation No: 10/666,462)	Art Unit:	2839
Filed:	September 19, 2003)		
For:	Integrated Circuit Package with a Varied Pitch Distance) _)		
	AMI	ENDME	ENT	
Comn P.O. E	Stop: Amendment hissioner for Patents Box 1450 ndria, VA 22313-1450			
Sir:				
	In response to the Office Action ma	iled Jun	e 7, 2005, appl	icants respectfully request
the Ex	aminer to enter the following amendr	nents ar	nd to consider	the following remarks.
	FIRST CLASS	CERTIFIC	ATE OF MAILING	
clas	reby certify that I am causing the above-referenced cors mail with sufficient postage on the date indicated belents, P.O. Box 1450, Alexandria, VA 22313-1450			
	S	eptember 7,	2005	
		Date of Dep		
		Leah Schwe	enke	
			Correspondence	
C	Luch Schwence Signature	<u>.</u>	September 7, 20	05 Date